PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09723353

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
			(Column	1)	(Colur	(Column 2)		TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			59		# !			RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			59 minus 20=		• 39			X\$ 9=		OR	X\$18=	702.00
INDEPENDENT CLAIMS			3 minus 3 = 0					X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	s than zero, enter "0" in column 2			į	TOTAL	Ellipsia (Physical Physiological Association)	OR	TOTAL	412.00
CLAIMS AS AMENDED - PART II									Control Make and Selfandaman To de Selfand		OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL ENTITY OR SMALL ENTITY				
AMENDMENT A	P	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 59	Minus	5	59	=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	PENDEN	CLAIM	= 4		X40=		OR	X80=	253.60
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ADDIT. FEE	SAN PORT OF THE PROPERTY OF TH	OR	TOTAL	
(Column 1) (Column 2) (Column 3)										9	ADDIT. FEE	
		(Column 1) CLAIMS	•	HIGH		(Column 3)) r		4001		•	
AMENDMENT B	, , , , , , , , , , , , , , , , , , ,	REMAINING AFTER AMENDMENT		NUMI PREVIC PAID		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
<u> </u>	THSI PHESE	NTATION OF MU	JETIPLE DEF	ENDEN	CLAIM			+135=		OR	+270=	
								TOTAL		00	TOTAL	
								ADDIT. FEE	··· •· · · · · · · · · · · · · · · · ·	OR	ADDIT. FEE	
P		(Column 1)		(Colu		(Column 3)	ล					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	:	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	-	OR	X\$18=	
	Independent	TATION OF MU	Minus	***	CL AINA	=		X40=		OR	X80=	
<u> </u>	I INST PRESE	NIATION OF MI	JEHRE DEF	LINDEN	CLAIN		, 	+135=		OR	+270=	
		nn 1 is less than th					<u> </u>	TOTAL			TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												